

**Fill in this information to identify the case:**

Debtor name Saffron Rewards Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
(State)

Case number (if known): 22-11298 (CTG)

☐ Check if this is an amended filing

**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**

☒ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From \_\_\_\_\_ to Filing date  
MM / DD / YYYY

☐ Operating a business  
☐ Other \_\_\_\_\_

\$ \_\_\_\_\_

For prior year:

From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

☐ Operating a business  
☐ Other \_\_\_\_\_

\$ \_\_\_\_\_

For the year before that:

From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

☐ Operating a business  
☐ Other \_\_\_\_\_

\$ \_\_\_\_\_

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From \_\_\_\_\_ to Filing date  
MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For prior year:

From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For the year before that:

From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)  
 Name \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**
**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Exhibit 3 Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. See Exhibit 4 Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)

Name

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____	\$ _____
5.2.	Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____	\$ _____

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____ Last 4 digits of account number: XXXX- ____	_____	\$ _____

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	Saffron v. Rossie _____ Case number 22cv02695-DMR	_____	ND California Name 450 Golden Gate Ave. Street San Francisco, CA 94102 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Rossie v. Saffron _____ Case number 2022-0817-CWW	_____	Chancery - Delaware Name 300 N. King Street Street Wilmington, DE 19801 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor

Saffron Rewards Inc.

Case number (if known) 22-11298 (CTG)

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
Custodian's name		\$
Street	Case title	Court name and address
City State ZIP Code	Case number	Name
		Street
	Date of order or assignment	City State ZIP Code

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			
9.2. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
			\$

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)

Name

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<u>Bayard, P.A.</u> <b>Address</b> <u>600 N. King St., Suite 400</u> <small>Street</small> <u>Wilmington, DE 19801</u> <small>City State ZIP Code</small> <b>Email or website address</b>  <b>Who made the payment, if not debtor?</b> 			\$ <u>45,000.00</u>

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	 <b>Address</b>  <small>Street</small>  <small>City State ZIP Code</small> <b>Email or website address</b>  <b>Who made the payment, if not debtor?</b> 			\$ _____

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$ _____
<b>Trustee</b>			

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)  
 Name

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
_____			
City _____	State _____	ZIP Code _____	
<b>Relationship to debtor</b>			
_____			
13.2. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
_____			
City _____	State _____	ZIP Code _____	
<b>Relationship to debtor</b>			
_____			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy	
14.1. _____	From _____	To _____
Street _____		
_____		
City _____	State _____	ZIP Code _____
14.2. _____	From _____	To _____
Street _____		
_____		
City _____	State _____	ZIP Code _____

Debtor Saffron Rewards Inc.  
NameCase number (if known) 22-11298 (CTG)**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name

Street

City

State

ZIP Code

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.**How are records kept?***Check all that apply:*

- ☐ Electronically
- ☐ Paper

**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.2.

Facility name

Street

City

State

ZIP Code

**Location where patient records are maintained** (if different from facility address). If electronic, identify any service provider.**How are records kept?***Check all that apply:*

- ☐ Electronically
- ☐ Paper

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

- ☐ No
- ☐ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- Yes. Does the debtor serve as plan administrator?

- ☐ No. Go to Part 10.
- ☐ Yes. Fill in below:

**Name of plan****Employer identification number of the plan**

EIN: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Has the plan been terminated?

- ☐ No
- ☐ Yes

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)

Name

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. _____ Name _____ Street _____ City State ZIP Code	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. _____ Name _____ Street _____ City State ZIP Code	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____ Street _____ City State ZIP Code	_____ _____ _____ Address _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____ Street _____ City State ZIP Code	_____ _____ _____ Address _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes



Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)  
Name

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**
**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City State ZIP Code			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)

Name \_\_\_\_\_

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ - _____  Dates business existed  From _____ To _____
25.2. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ - _____  Dates business existed  From _____ To _____
25.3. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ - _____  Dates business existed  From _____ To _____

Debtor

Saffron Rewards Inc.

Name

Case number (if known) 22-11298 (CTG)

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Dates of service
26a.1. <u>Stu Pollack</u> <small>Name</small> <u>1595 Wawona Drive</u> <small>Street</small> <u>San Jose,</u> <u>CA</u> <u>95125</u> <small>City State ZIP Code</small>	From <u>1/22</u> To <u>Present</u>

Name and address	Dates of service
26a.2. _____ <small>Name</small> _____ <small>Street</small> _____ <small>City State ZIP Code</small>	From _____ To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address	Dates of service
26b.1. _____ <small>Name</small> _____ <small>Street</small> _____ <small>City State ZIP Code</small>	From _____ To _____

Name and address	Dates of service
26b.2. _____ <small>Name</small> _____ <small>Street</small> _____ <small>City State ZIP Code</small>	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <u>Stu Pollack</u> <small>Name</small> <u>1595 Wawona Drive</u> <small>Street</small> <u>San Jose,</u> <u>CA</u> <u>95125</u> <small>City State ZIP Code</small>	_____ _____ _____

Debtor

Saffron Rewards Inc.

22-11298 (CTG)

Case number (if known)

Name

**Name and address****If any books of account and records are unavailable, explain why**

26c.2.

Name

Saumil Nanavati

Street

50 Lansing Street, #105

San Francisco,

CA

94105

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address**

26d.1.

Name

Street

City

State

ZIP Code

**Name and address**

26d.2.

Name

Street

City

State

ZIP Code

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name

Street

City

State

ZIP Code

Debtor Saffron Rewards Inc. Case number (if known) 22-11298 (CTG)

Name \_\_\_\_\_

Name of the person who supervised the taking of the inventory

Date of  
inventory

The dollar amount and basis (cost, market, or  
other basis) of each inventory

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name

Address

Position and nature of any  
interest

% of interest, if any

Saumil Nanavati

50 Lansing St., #105, San Francisco, CA

CEO, Director

100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Name

Address

Position and nature of  
any interest

Period during which  
position or interest was  
held

Alex Rossie

3212 81st PI SE Unit C 101, Mercer Is., WA

VP, Director

From 11/21 To 2/22

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient

Amount of money or  
description and value of  
property

Dates

Reason for  
providing the value

30.1. See Exhibit 4

Name

Street

City

State

ZIP Code

Relationship to debtor

Saffron Rewards Inc.

22-11298 (CTG)

Debtor

Name

Case number (if known)

## Name and address of recipient

30.2

Name

Street

City

State

ZIP Code

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/20/2022  
MM / DD / YYYY

**x**   
Signature of individual signing on behalf of the debtor

Printed name Saumil Nanavati

Position or relationship to debtor CEO

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No☒ Yes

## Exhibit 3

Date	Payee	Category	Total
12/12/2022	Stu Pollack	Accounting & Payroll Services	816.00
12/12/2022	Intuit	\$2000	85.00
12/10/2022	WhitePages	\$2000	9.99
12/10/2022	Zoom	\$2000	32.23
12/08/2022	Saumil Nanavati	Legal Fees - General	57,263.91
12/06/2022	Bayard, PA	Legal Fees - General	45,000.00
12/06/2022	Saumil Nanavati	Office Supplies	18.56
12/05/2022	Saumil Nanavati	Travel	1,246.20
12/05/2022	Saumil Nanavati	Legal Fees - General	787.50
12/05/2022	Google	\$2000	31.75
12/01/2022	Burke, Williams & Sorensen, LLP	Legal Fees - General	4,500.00
12/01/2022	Odell Girton Siegel LLC	Legal Fees - General	37,590.00
12/01/2022	Odell Girton Siegel LLC	Legal Fees - General	32,220.00
12/01/2022	Odell Girton Siegel LLC	Legal Fees - General	25,955.00
12/01/2022	Google	\$2000	24.00
11/30/2022	Stu Pollack	Accounting & Payroll Services	356.00
11/29/2022	WEBFLOW.COM	Website	20.00
11/29/2022	TYPEFORM, S.L.	\$2000	53.10
11/28/2022	<a href="https://mercury.com">mercury.com</a>	Bank fees & service charges	46.52
11/28/2022	Galioto	Consultants	4,651.64
11/25/2022	<a href="https://monday.com">monday.com</a>	\$2000	36.00
11/23/2022	Saumil Nanavati	Legal Fees - General	35,002.25
11/22/2022	<a href="https://mercury.com">mercury.com</a>	Bank fees & service charges	72.14
11/22/2022	Galioto	Consultants	7,213.52
11/21/2022	Saumil Nanavati	Travel	13,913.65
11/18/2022	SLACK T02QATNHHAR	\$2000	45.00
11/16/2022	Yoga with Magi	Employee Benefits	4,975.00
11/10/2022	Zoom	\$2000	32.23
11/07/2022	Google	\$2000	39.69
11/05/2022	SLACK T02QATNHHAR	\$2000	8.47
11/05/2022	SLACK T02QATNHHAR	\$2000	15.00
11/01/2022	Google	\$2000	24.00
10/31/2022	Stu Pollack	Accounting & Payroll Services	206.00
10/29/2022	WEBFLOW.COM	Website	20.00
10/29/2022	TYPEFORM, S.L.	\$2000	53.10
10/25/2022	monday.com	\$2000	36.00
10/20/2022	SVCS	\$2000	13.00
10/18/2022	SLACK T02QATNHHAR	\$2000	26.25
10/17/2022	Saumil Nanavati	Travel	3,102.73
10/17/2022	Zoom	\$2000	22.67
10/06/2022	DocuSign	\$2000	15.00
10/05/2022	Galioto	Consultants	6,991.61
10/05/2022	Galioto	Consultants	69.92
10/05/2022	Google	\$2000	35.85
10/04/2022	SP PANGRAM PANGRAM F	Equipment < \$2000	320.00
10/02/2022	Amazon web services	Hosting Services	199.58
10/02/2022	Google	\$2000	24.20
09/30/2022	Stu Pollack	Accounting & Payroll Services	356.00
09/29/2022	WEBFLOW.COM	Website	20.00
09/29/2022	TYPEFORM, S.L.	\$2000	53.10

09/28/2022	Goodwin Procter	Legal Fees - General	158,774.49
09/28/2022	Dailey LLP	Legal Fees - General	5,000.00
09/25/2022	monday.com	\$2000	36.00
09/20/2022	Goodwin Procter	Legal Fees - General	37,264.75
09/20/2022	Goodwin Procter	Legal Fees - General	21,329.55
09/19/2022	SLACK T02QATNHHAR	\$2000	27.54
09/18/2022	SVCS	\$2000	13.00
09/15/2022	Saumil Nanavati	Travel	5,861.50



Exhibit 4.1

Date (UTC)	Description	Amount	Reference
12/8/22	saumil nanavati	57263.91	Legal Fee Payment to Dailey LLP Invoice. Expense Report #R00d4zgNKpX1
12/6/22	saumil nanavati	18.56	Supplies. Expense Report #R00dQle1P5jH
12/5/22	saumil nanavati	787.5	Freeman - Legal Fees Expense Report #R00589aYaT2v
12/5/22	saumil nanavati	1246.2	Travel. Expense Report #R00P3TLBwic1
11/23/22	saumil nanavati	35002.25	Legal fee payment to Dailey LLP invoice. Expense Report: R004FW3nn5Sm
11/21/22	saumil nanavati	13913.65	Travel. Expense Report #R00dAXUkKaHn
10/17/22	saumil nanavati	3102.73	Travel. Expense #1715649484142354
9/15/22	saumil nanavati	5861.5	Travel. Expense: 7827134388290083
8/19/22	saumil nanavati	8662.73	Customer Attraction. Expense report: 98907792
7/5/22	saumil nanavati	6866.61	Travel. Expense Report #96918597
6/6/22	saumil nanavati	1300.63	Expense Report #95209022
5/2/22	saumil nanavati	2464.98	Expense Report #93343884
4/28/22	saumil nanavati	6641.01	Expense Report #92884435

Exhibit 4.2

Date (UTC)	Description	Amount	Reference
5/2/22	Alex Rossi	44	83B Return
1/21/22	Alex Rossi	328.69	Software & SaaS < \$2000

**Fill in this information to identify the case:**

Debtor name Saffron Rewards Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
(State)

Case number (If known): 22-11298 (CTG)

☐ Check if this is an amended filing

**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*.....

\$ 0

**1b. Total personal property:**Copy line 91A from *Schedule A/B*.....

\$ 1,159,416.67

**1c. Total of all property:**Copy line 92 from *Schedule A/B*.....

\$ 1,159,416.67

**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$ 0

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$ 72,000.00

**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$ 1,026,786.74

**4. Total liabilities**.....  
Lines 2 + 3a + 3b

\$ 1,098,786.74

**Fill in this information to identify the case:**

Debtor name Saffron Rewards Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
(State)

Case number (if known): 22-11298 (CTG)

☐ Check if this is an amended filing

**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**\$ 0**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>Evolve Bank &amp; Trust</u>	<u>Checking</u>	<u>7839</u>	\$ <u>30,000.00</u>
3.2. <u>Evolve Bank &amp; Trust</u>	<u>Savings</u>	<u>0515</u>	\$ <u>201,566.03</u>
<u>BlueRidge Bank</u>	<u>Checking</u>	<u>3166</u>	\$ <u>1,050.64</u>

**4. Other cash equivalents (Identify all)**

4.1. \_\_\_\_\_ \$ \_\_\_\_\_

4.2. \_\_\_\_\_ \$ \_\_\_\_\_

**5. Total of Part 1**\$ 232,616.67

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit	
7.1. _____	\$ _____
7.2. _____	\$ _____

Case number (if known)

Part 5:
Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
	MM / DD / YYYY	\$		\$
20. Work in progress				
	MM / DD / YYYY	\$		\$
21. Finished goods, including goods held for resale				
	MM / DD / YYYY	\$		\$
22. Other inventory or supplies				
	MM / DD / YYYY	\$		\$
23. Total of Part 5				\$ 0
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6:
Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
	\$		\$
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)			
	\$		\$
31. Farm and fishing supplies, chemicals, and feed			
	\$		\$
32. Other farming and fishing-related property not already listed in Part 6			
	\$		\$

Debtor

Name

Case number (if known)

## 33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ 0

## 34. Is the debtor a member of an agricultural cooperative?

☒ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes

## 35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value \$ Valuation method Current value \$

## 36. Is a depreciation schedule available for any of the property listed in Part 6?

☒ No☐ Yes

## 37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

☒ No☐ Yes

## Part 7: Office furniture, fixtures, and equipment; and collectibles

## 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
	\$		\$
40. Office fixtures			
	\$		\$
41. Office equipment, including all computer equipment and communication systems equipment and software			
	\$		\$
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1	\$		\$
42.2	\$		\$
42.3	\$		\$

## 43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 0

## 44. Is a depreciation schedule available for any of the property listed in Part 7?

☒ No☐ Yes

## 45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
 ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	(Where available)		

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1	\$		\$
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1	\$		\$
48.2	\$		\$

49. Aircraft and accessories

49.1	\$		\$
49.2	\$		\$

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

	\$		\$
--	----	--	----

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$

0

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
 ☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
 ☐ Yes

Debtor

Name

Case number (if known)

**Part 9:** Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.  
☐ Yes. Fill in the information below.

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No  
☐ Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10:** Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. <b>Patents, copyrights, trademarks, and trade secrets</b> See attached exhibit 60.	\$ _____	estimated	\$ 2,000.00
61. <b>Internet domain names and websites</b> saffrons.co; saffron.cards	\$ _____	estimated	\$ 1,010.00
62. <b>Licenses, franchises, and royalties</b>	\$ _____	_____	\$ _____
63. <b>Customer lists, mailing lists, or other compilations</b> Investor list; business projections	\$ _____	_____	\$ _____
64. <b>Other intangibles, or intellectual property</b>	\$ _____	_____	\$ _____
65. <b>Goodwill</b>	\$ _____	_____	\$ _____

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ 3,010.00



Debtor

Name

Case number (if known)

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11:** All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes. Fill in the information below.

**Current value of  
debtor's interest**

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ — \_\_\_\_\_ = ➔ \$ 0  
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

\_\_\_\_\_ Tax year \_\_\_\_\_ \$ 0  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\_\_\_\_\_ \$ 0

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Three outstanding claims against Alex Rossie \$ 913,000.00

Nature of claim \_\_\_\_\_

Amount requested \$ 913,000.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\_\_\_\_\_ \$ 0

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\_\_\_\_\_ \$ 0

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\_\_\_\_\_ \$ 0  
\_\_\_\_\_ \$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

**\$ 913,000.00**

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

## Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	\$ 232,616.67	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$ 1,790.00	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	\$ 0	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	\$ 0	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$ 0	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	\$ 0	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	\$ 0	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$ 0	
88. <b>Real property.</b> <i>Copy line 56, Part 9.</i> .....	→	\$ 0
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	\$ 3,010.00	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ \$ 913,000.00	
91. <b>Total.</b> Add lines 80 through 90 for each column..... 91a.	\$ 1,159,416.67	+ 91b. \$ 0
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92. ....		\$ 1,150,416.67

Exhibit 60

1. Saffron has filed for a Provisional Patent (provisional status expires Q2 2023).  
Value: \$1,000
2. Saffron has a built software IP within its possession.  
Value: \$1,000.
3. Alex Rossie has a set of software within his sole possession that belongs to Saffron  
Value: Unknown

**Fill in this information to identify the case:**

Debtor name Saffron Rewards Inc.  
 United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
 (State)  
 Case number (If known): 22-11298 (CTG)

☐ Check if this is an amended filing

**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☐ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

**2.1 Creditor's name****Describe debtor's property that is subject to a lien**

\_\_\_\_\_  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_

**Creditor's mailing address**

\_\_\_\_\_  
 \_\_\_\_\_

**Creditor's email address, if known**

\_\_\_\_\_

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- ☐ No  
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

**Describe the lien****Is the creditor an insider or related party?**

- ☐ No  
☐ Yes

**Is anyone else liable on this claim?**

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**2.2 Creditor's name****Describe debtor's property that is subject to a lien**

\_\_\_\_\_  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_

**Creditor's mailing address**

\_\_\_\_\_  
 \_\_\_\_\_

**Creditor's email address, if known**

\_\_\_\_\_

**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**

- ☐ No  
☐ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

**Describe the lien****Is the creditor an insider or related party?**

- ☐ No  
☐ Yes

**Is anyone else liable on this claim?**

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

\$ 0

## Part 1: Additional Page

## Column A

## Amount of claim

Do not deduct the value of collateral.

## Column B

## Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2. Creditors name</b>  <b>Creditor's mailing address</b>   <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.   <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b>    <b>Describe the lien</b>   <b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

<b>2. Creditors name</b>  <b>Creditor's mailing address</b>   <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.   <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b>    <b>Describe the lien</b>   <b>Is the creditor an insider or related party?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--



**Fill in this information to identify the case:**

Debtor Saffron Rewards Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
(State)

Case number 22-11298 (CTG)  
(If known)

☐ Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1:** List All Creditors with **PRIORITY** Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☐ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address

Saamil Nanavati  
50 Lansing St., #105  
San Francisco, CA 94105

**Total claim****Priority amount**As of the petition filing date, the claim is: \$ 72,000.00\$ 15,150.00

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

April 2022

Basis for the claim:

wages/salary

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)**2.2** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_

\$ \_\_\_\_\_

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)**2.3** Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \_\_\_\_\_

\$ \_\_\_\_\_

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of **PRIORITY** unsecured claim: 11 U.S.C. § 507(a) (\_\_\_\_)

## Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)

2. Priority creditor's name and mailing address

\$ \_\_\_\_\_ \$ \_\_\_\_\_

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number \_\_\_\_\_

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (\_\_\_\_)



**Part 2:** List All Creditors with NONPRIORITY Unsecured Claims

**3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Nalin Balan</u> <u>50 Lansing St., #702</u> <u>San Francisco, CA 94105</u>  <b>Date or dates debt was incurred</b> <u>January 2022</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>SAFE Note</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>10,000.00</u>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Sameek Chanda</u> <u>50 Lansing St., #305</u> <u>San Francisco, CA 94105</u>  <b>Date or dates debt was incurred</b> <u>January 2022</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>SAFE Note</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>10,000.00</u>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Prabu Durairaj</u> <u>350 Fay Way</u>  <b>Date or dates debt was incurred</b> <u>January 2022</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>SAFE Note</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>10,000.00</u>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Everest Discovery</u> <u>1500 Walnut Street, Suite 1010</u> <u>Philadelphia, PA 19102</u>  <b>Date or dates debt was incurred</b> <u>November 2022</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>services provided</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>4,415.00</u>
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Goodwin Proctor LLP</u> <u>Three Embarcadero Center</u> <u>San Francisco, CA 94111</u>  <b>Date or dates debt was incurred</b> <u>June-Nov. 2022</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>legal services</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>182,371.74</u>
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Motivate Ventures GP I, LLC</u> <u>910 W. Van Buren St., Suite 400</u> <u>Chicago, IL 60607</u>  <b>Date or dates debt was incurred</b> <u>December 2021</u> <b>Last 4 digits of account number</b> <u>      </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>SAFE Note</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>800,000.00</u>

## Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>    </u>	Nonpriority creditor's name and mailing address Alex Rossie  3212 81st PI SE Unit C101  Mercer Island, WA 98040	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 10,000.00
		Basis for the claim: <u>advancement/other asserted claims</u>	
	Date or dates debt was incurred <u>January 2022</u> Last 4 digits of account number <u>      </u>	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3. <u>    </u>	Nonpriority creditor's name and mailing address State of California     Date or dates debt was incurred <u>      </u> Last 4 digits of account number <u>      </u>	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>                    </u>
		Basis for the claim: <u>tax</u>	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>    </u>	Nonpriority creditor's name and mailing address State of Delaware     Date or dates debt was incurred <u>      </u> Last 4 digits of account number <u>      </u>	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>                    </u>
		Basis for the claim: <u>tax</u>	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>    </u>	Nonpriority creditor's name and mailing address     Date or dates debt was incurred <u>      </u> Last 4 digits of account number <u>      </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>                    </u>
		Basis for the claim: <u>                    </u>	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <u>    </u>	Nonpriority creditor's name and mailing address     Date or dates debt was incurred <u>      </u> Last 4 digits of account number <u>      </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>                    </u>
		Basis for the claim: <u>                    </u>	
		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

## Part 3:

## List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.1. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

### Part 3:

[illegible]

Debtor

Saffron Rewards Inc.  
Name

Case 22-11298-TMH

Doc 9

Filed 12/20/22

Page 37 of 40

Case number (if known) 22-11298 (CTG)

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a.

\$ 72,000.00

5b. Total claims from Part 2

5b.

+

\$ 1,026,786.74

5c. Total of Parts 1 and 2

5c.

\$ 1,098,786.74

Lines 5a + 5b = 5c.

**Fill in this information to identify the case:**

Debtor name Saffron Rewards Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of DE  
(State)

Case number (If known): 22-11298 (CTG) Chapter 7

☐ Check if this is an amended filing

**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest	Customer Agreement	Nathan Davis Jr.
	State the term remaining	Open Ended	19137 Merryweather Drive Santa Clarita, CA 91351 bookndj@gmail.com
2.2	State what the contract or lease is for and the nature of the debtor's interest	Co-Working Space	Shack 15
	State the term remaining	through March 17, 2022	One Ferry Building San Francisco, CA 94111
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		

Debtor

Name

Case number (if known)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

## List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.\_

State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

**Fill in this information to identify the case and this filing:**Debtor Name SAFFRON REWARDS INC.

United States Bankruptcy Court for the District of Delaware

Case number (if known) 22-11298 (CTG)**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING** – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 12/20/2022  
MM / DD / YYYY

✕

/s/ Saumil Nanavati

Signature of individual signing on behalf of debtor

Saumil Nanavati

Printed name

CEO

Position or relationship to debtor